



TRW  
213/2

PTO/SB/22 (10-00)  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Docket Number (Optional) 35850-165999
In re Application of BOLNICK et al.		
Application Number 09/829,937		Filed April 11, 2001
For SYSTEM, METHOD AND COMPUTER PROGRAM PRODUCT FOR GATHERING AND DELIVERING PERSONALIZED USER INFORMATION		
Group Art Unit 2132	Examiner L. Truong	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows  
(check time period desired):

- |   |                   |
|---|-------------------|
| <input type="checkbox"/> One month (37 CFR 1.17(a)(1))  | \$ _____          |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))   |                   |
| <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))  | <u>\$1,020.00</u> |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))  | \$ _____          |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))  | \$ _____          |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____          |                   |
| <input type="checkbox"/> A check in the amount of the fee is enclosed.  |                   |
| <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.   |                   |
| <input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.  |                   |
| <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>22-0261</u> . |                   |
- I have enclosed a duplicate copy of this sheet.

I am the  applicant/inventor.

- assignee of record of the entire interest. See 37 CFR 3.71  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  
 attorney or agent of record.  
 attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a). 43,466 .

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

June 1, 2005

Date  
09829937

06/02/2005 SDENB031 00000043 220261

01 FC:1253 1020.00 DA

Signature

Ralph P. Albrecht

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

\*Total of 1 forms are submitted.



# FEE TRANSMITTAL For FY 2005

(Reflects USPTO filing fees in effect from 12/08/04)

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$ 1,020.00)

## Complete if Known

Application Number	09/829,937
Filing Date	April 11, 2001
First Named Inventor	BOLNICK
Examiner Name	L. Truong
Art Unit	2132
Attorney Docket No.	35850-165999

## METHOD OF PAYMENT (check all that apply)

Check  Credit Card  Money Order  
 Deposit Account  None

Deposit Account Number

22-0261

Deposit Account Name

Venable LLP

The Director is hereby authorized to: (check all that apply)

- Charge fee(s) indicated below  
 Charge fee(s) indicated below, except for the filing fee  
 Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.16 and 1.17  
 Credit any overpayments

to the above-identified deposit account.

Other (please identify): \_\_\_\_\_

## FEE CALCULATION (continued)

### 2. EXTRA CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20	50	25
Each independent claim over 3	200	100
Multiple dependent claims	360	180
For Reissues, each claim over 20 and more than in the original patent	50	25
For Reissues, each independent claim more than in the original patent	200	100

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 20 =	0	x 50 =	0.00

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
- 3 =	0	x 200.00 =	0.00

Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
		180.00

**Subtotal (2) \$** \_\_\_\_\_

### 3. OTHER FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)	Fee Paid
1-month extension of time	120	60	_____
2-month extension of time	450	225	_____
3-month extension of time	1020	510	\$1020.00
4-month extension of time	1,590	795	_____
5-month extension of time	2,160	1,080	_____
Information disclosure stmt. fee	180	180	_____
37 CFR 1.17(q) processing fee	50	50	_____
Non-English specification	130	130	_____
Notice of Appeal	500	250	_____
Filing a brief in support of appeal	500	250	_____
Request for oral hearing	1,000	500	_____

Other: Request for Continued Examination (RCE)

**Subtotal (3) \$** **1,020.00**

## SUBMITTED BY

Signature	Registration No. (Attorney/Agent) 43,466	Telephone (202) 344-4000
Name (Print/Type) Ralph P. Albrecht	Date June 1, 2005	